



**Thank you for supporting UFV!**

☐ YES! I wish to support UFV! Here is my donation of: \$ \_\_\_\_\_

Donor Information: I am a UFV: ☐ Faculty ☐ Staff

Prefix: Dr. / Mr. / Mrs. / Ms. / Miss / Other: \_\_\_\_\_

First Name(s): \_\_\_\_\_ Last Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Donation Information:

☐ UFV Student Emergency Fund

☐ Other: \_\_\_\_\_

☐ Faculty and Staff Bursary

Payment method:

**Cheque** ☐ I have enclosed a cheque payable to: University of the Fraser Valley

**Credit Card** ☐ I would like to make a one-time gift of \$\_\_\_\_\_ and charge it to my credit card:

☐ VISA ☐ MasterCard ☐ AMEX

Card Number: \_\_\_\_\_ Expiry: \_\_\_\_\_

Signature: \_\_\_\_\_

**Monthly** ☐ I authorize a monthly donation to UFV in the amount of \$\_\_\_\_\_ to be taken from my credit card (please fill out your credit card details in the space provided above)

**Payroll Deduction** ☐ I authorize a monthly donation to UFV in the amount of \$\_\_\_\_\_ to be taken from my paycheque until I inform UFV otherwise. Please note your donation amount will be split in half; half deducted from your mid-month paycheque; half deducted from your month end paycheque.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

☐ I wish to learn more about creating a legacy at UFV. Please send me information on:

☐ including UFV in my will

☐ tax-smart giving: shares, RRSP/RRIF, life insurance, real estate

☐ Please note that UFV is already included in my will.

**THANK YOU!**

All donations to UFV will receive a tax receipt.

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